

APPLICATION FOR "RESIDENTIAL" ENCROACHMENT

THIS SECTION TO BE FILLED OUT BY PROPERTY OWNER

PROPERTY OWNER _____

RESIDENT PHONE NUMBER _____

CONTACT NAME _____

CONTACT PHONE NUMBER _____

PROPERTY ADDRESS _____

CONTACT EMAIL _____

CITY, STATE, ZIP CODE _____

PARCEL NUMBER _____

DATE: _____ SIGNATURE _____

Description for use of Property (Must be submitted at the time of application)

(attach a dimensional site plan & elevation drawing to scale on 8 1/2 x 11 paper)

THIS SECTION TO BE FILLED OUT BY DRT (DEVELOPMENT REVIEW TEAM)

Conditions Determined by Development Review Team:

Zoning:	_____	Date:	_____	Approved	_____	Denied	_____
Publ. Util:	_____	Date:	_____	Approved	_____	Denied	_____
Engineering:	_____	Date:	_____	Approved	_____	Denied	_____
Transportation:	_____	Date:	_____	Approved	_____	Denied	_____
Fire:	_____	Date:	_____	Approved	_____	Denied	_____

DRT forms may be found at http://www.scldocs.com/building/DRT_Application_03_29_2016.pdf email to: DRT@slcgov.com

THIS SECTION TO BE COMPLETED BY PROPERTY MANAGEMENT

_____ Description Letter (Outline what applicant is requesting. Include anticipated work.)

_____ DRT Signed off _____ DRT # _____

_____ Drawings (2) (with details and dimensional site plan on 8 1/2 x 11 paper)

_____ Application Fee \$25.00 (Non Refundable) _____ Lease Fee if applicable \$ _____

_____ OKAY to Issue: Real Estate Services has all documents on file

_____ OKAY to issue: Subject to _____

_____ Checked By

_____ Date